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RECEIVED

| AMENDMENT TO ANOMITY AND A TOTAL | | | | | Dockel Number (ပြည်းတိုးခြုံး | | |
|---|---|--------------------|---|---------------------------------------|-------------------------------|---------------------------|--|
| AMENDMENT TRANSMITTAL LETTER | | | F19 | F19.1 CHROLDGY CE | | | |
| Application Number Fili | ng Date | Exa | miner | · · · · · · · · · · · · · · · · · · · | - [] | Group | |
| | 9/18/2001 | I | Easthom, I | Karl | | Ari Unit 28 3 2 | |
| ANALOG SENSOR(S) WITH SN | IAP-THROUGH | I TAC | TILE FEE | OBACK | <u>_</u> | | |
| TO THE COMMISSIONER OF PAT Transmitted herewith is an amend Small Entity status of this a statement previously submi A verified statement to esta | dment in the above pplication has be tited. blish Small Entity | ve · ide en est | entified applica ablished under | r 37 CFR 1. | | | |
| No additional fee is required. The fee has been calculate | | w: | | | | | |
| | CLAIMS AS A | MEN | DED | | | | |
| | (1) | | (2) | (3) | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT NUMBER | RATE | FEE | |
| TOTAL CLAIMS | . 24 | minus | 24 | 0 | x \$ | 0 | |
| INDEPENDENT CLAIMS | . 8 | minus | 8 | 0 | x \$ | 0 | |
| MULTIPLE DEPENDENT CLAIM ADDE | D | | 0 | | \$ | 0 | |
| | | | | тот | <u> </u> | \$ 0 | |
| | If applicant has small entity status under 37 CFR 1.9 and SMALL ENTITY 1.27, then divide total fee by 2, and enter amount here. TOTAL | | | | | | |

Aug. 27, 2002

Signature Signature